



Re the application of J. Salfeld et al.
Serial No. 08/599,226
Filed February 9, 1996
For Human Antibodies that Bind Human TNF α

Case Docket No. BBI-043

ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith for filing in connection with the above-identified application are the following:

- ☒ Amendment and Response (including Appendices A and B);
- ☒ Request for Three-Month Extension of Time (in duplicate);
- ☒ Information Disclosure Statement;
- ☒ PTO Form 1449;
- ☒ Copies of References (32) cited on PTO Form 1449; and
- ☒ Notification of Change of Mailing Address.

The fee has been calculated as shown below:

| (Col. 1) | | (Col. 2) | | (Col. 3) |
|---|-------------------------------------|----------|---------------------------------------|------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA |
| TOTAL | * 69 | MINUS | ** 64 | = 5 |
| INDEP. | * 6 | MINUS | *** 12 | = 0 |
| <input checked="" type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | |

| SMALL ENTITY | |
|---------------------|---------------|
| RATE | ADDIT. FEE |
| x 11 = | \$.00 |
| x 41 = | \$.00 |
| +135 = | \$.00 |
| TOTAL ADDIT. FEE | \$.00 |

OR

| OTHER THAN A SMALL ENTITY | |
|------------------------------|---------------|
| RATE | ADDIT. FEE |
| x 22 = | \$110.00 |
| x 82 = | \$.00 |
| + 270 = | \$270.00 |
| TOTAL | \$380.00 |

- * If the entry in Col 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ A check in the amount of \$950.00 is enclosed for extension of time fee.
- ☒ A check in the amount of \$380.00 is enclosed for extra claims fee.
- ☒ A check in the amount of \$240.00 is enclosed for submission of an IDS under §1.97(c).
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-0080. A duplicate copy of this sheet is enclosed.
 - ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
 - ☒ Any patent application processing fees under 37 CFR 1.17.
- ☒ Please charge any additional fees or credit any overpayments associated with this communication to our Deposit Account No. 12-0080. A duplicate copy of this sheet is enclosed.

I hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on:

February 5, 1998

Date

Signature of Person Mailing

Catherine J. Kara

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